

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Ex itea</i>		04-09-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>g m</i>	852	05-20-01
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	1-12/12/01
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Claim	Date
Final	
Original	12/12/01
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Claim	Date
Final	
Original	11/12/01
101	3/20/2002
102	9/27/2002
103	11/11/01
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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